

# EXHIBIT W



1           A       Well, there are many examples of  
2       revisionist-themed marketing that come to mind for  
3       1990s, early 2000s.

4           Q       Are the examples that are coming to your mind  
5       examples of revisionist marketing by manufacturers or  
6       some other entity?

7           A       Both.

8           Q       Can you give me an example of revisionist  
9       marketing in the mid-1990s or early 2000s that you're  
10      aware of from a wholesaler or distributor?

11          A       Yes.

12          Q       Go ahead.

13          A       Well, one example that comes to mind is that  
14      AmerisourceBergen had a continuing education program for  
15      pharmacists, and the idea was to help train pharmacists  
16      to advise customers.

17                 Everyone understood that pharmacists were an  
18      important part of the health care system; that the  
19      patients would ask them questions about medication; the  
20      pharmacist kept an eye on patients and so on.

21                 So there's a continuing education program  
22      that the theme of it is, how do you advise patients  
23      about opioids? And this particular continuing education  
24      program -- I think the date is 2000, but, again, I don't  
25      have the documents in front of me. But I -- I think

1 it's around 2000. 1999, 2000 -- includes, frankly,  
2 revisionist literature that was ghostwritten by  
3 Purdue-funded operatives which goes out to these  
4 pharmacists and adopts a very pro opioid stance, cites  
5 the Porter and Jick article, says there's low risk, you  
6 should reassure your -- your customers if they're  
7 worried about this. It's -- it's what I would call  
8 classic revisionist marketing.

9 And so that's, I guess, an example of a  
10 project, the writing of a pro opioid article that's  
11 actually created by the manufacturer, and then it's  
12 disseminated through the distributor as part of a  
13 continuing education program that's aimed at  
14 pharmacists.

15 Off the top of my head, I'm not -- I just  
16 threw in a couple of examples in the report, and I'm  
17 doing this without access to any of these documents, but  
18 that comes to mind.

19 Q And the documents that you just mentioned --  
20 that -- that came to your mind, can you recall where you  
21 received that or how you received it?

22 MR. ELSNER: Objection.

23 THE WITNESS: Sitting here right now, no.

24 I -- I -- I -- I don't know. Obviously, there are  
25 discovery documents in the context of one of these

1 trial. There are other examples I could give, yes.

2 BY MR. WEIMER:

3 Q And I just -- my -- I want to make sure my  
4 question is clear.

5 What I'm asking you is, up to today, have you  
6 done any work to identify other examples of distributor  
7 involvement in revisionist-themed marketing about which  
8 you plan to testify at trial?

9 A Would you -- would you repeat the question?  
10 There -- there were several parts of it I'm -- I'm not  
11 quite sure about. About which I intend to testify.  
12 Please ask the question again.

13 Q So here -- and -- and let me see if I can put  
14 a little context around the question.

15 And I'm sure you're familiar from the fact  
16 that you've done expert reports in other cases, the --  
17 the point of the report is to fairly describe the scope  
18 of the opinions that you intend to offer as an expert  
19 witness at trial and identify the materials -- the  
20 supporting materials upon which those opinions are  
21 based.

22 You are talking on page 99 of your report  
23 about an example of a particular type of marketing  
24 activity.

25 What I'm asking is, as you sit here today, do

1       you have -- prepared, organized, assembled -- a set of  
2       additional examples that, if you testify at trial, I am  
3       going to hear you talk about?

4               MR. ELSNER: Objection.

5               THE WITNESS: Organized, prepared, locked and  
6       loaded and ready to use in trial, no. I have read  
7       other documents that reinforce the opinion that I  
8       state in this report that distributors were engaged  
9       in marketing activities, which I find to be  
10      continuous with their historical behavior.

11              What I'm trying to do here is -- is show that  
12      distributors have never really simply been in a  
13      logistics business; that for a century and a half,  
14      they've been involved in marketing. And that  
15      marketing continued in this new era of opioid  
16      revisionism. That's the point I'm trying to get  
17      across.

18      BY MR. WEIMER:

19              Q       Okay. And that marketing that you just  
20      described that you say distributors have been engaged in  
21      for a century and a half, is that marketing to  
22      pharmacies?

23              MR. ELSNER: Objection.

24              THE WITNESS: Among others, yes.

25      BY MR. WEIMER:

1 Q What others?

2 A The -- the customers of pharmacies.

3 By the mid-20th century, wholesalers were  
4 helping retail pharmacists plan the layout of their drug  
5 stores in a way that would be maximally appealing to  
6 consumers.

7 So they're thinking about consumer behavior.  
8 They're thinking about where you place advertisements.  
9 They're helping to design advertisements for drug  
10 stores. They're involved in all of these activities,  
11 and they're bragging about it. They're promoting it.

12 They say, "These are the services we offer  
13 you. Not just the delivery of drugs. We can help you  
14 sell more products, and -- and not just pharmaceuticals.  
15 We're in business to help you."

16 And they continue to do that in the late 20th  
17 and the early 21st century with respect to opioid  
18 analgesics.

19 Q One of the things you said in your last  
20 answer was that wholesalers were helping to design  
21 advertisements for drug stores.

22 What do you mean by that?

23 A Well, they -- they were -- they were coming  
24 up with copy and telling druggists where to place the  
25 ads so that they would be -- it would catch the eye of

1 the consumer and how to arrange the aisles and what  
2 products went best with other products.

3 They were offering marketing -- I would  
4 describe those as marketing services, and they were  
5 providing them.

6 Q I want to be very precise in my question,  
7 Dr. Courtwright, in making sure I precisely understand  
8 your answer.

9 A Okay.

10 Q Your -- one of the things you said in your  
11 last answer was that you -- you believe wholesalers help  
12 pharmacies design advertisements.

13 So my first question is, is it your belief  
14 that wholesalers provided any substantive content about  
15 any particular drug to a pharmacy to be used in an -- in  
16 an advertisement?

17 A Yes. Not only that, they created  
18 advertisements in their own catalogs which they sent to  
19 the pharmacies.

20 Q Created advertisements in their own catalogs  
21 to -- to be sent to patients?

22 MR. ELSNER: Objection.

23 THE WITNESS: No. What I said was sent to  
24 their own pharmacies.

25 So perhaps an example would be helpful.



1           If you look at a McKesson catalog from the  
2           late 19th century, it's not just a price list.  
3           It's not just, if you ordered three dozen bottles  
4           of these pills, we'll sell them to you at this  
5           price.

6           There -- there are colorful advertisements.  
7           There are discounts. There's -- there's all kinds  
8           of marketing material in the catalog. And --

9           Go ahead. I -- other -- other examples come  
10          to mind, but I don't want to take your time. Go  
11          ahead.

12       BY MR. WEIMER:

13           Q       Okay. So let's focus on the time period  
14          after the mid-1980s.

15                  In that time period, is it your belief that  
16          wholesalers provided any substantive content about any  
17          particular drug to a pharmacy to be used in an  
18          advertisement to patients?

19                  MR. ELSNER: Objection.

20                  THE WITNESS: Yes.

21       BY MR. WEIMER:

22           Q       Okay. And what is that belief based on?

23           A       I'm sorry. You broke up on that question.

24           Q       What is that belief based on?

25           A       Oh. Documents indicating that there were --

1       that opioid manufacturers contracted with druggists to  
2       run infomercials that were sent through the distributors  
3       to -- to their linked drug stores, and these  
4       infomercials contained information about opioids and --  
5       and conditions that might be treated with opioid drugs.

6           Q       Okay. In that example that you just  
7       mentioned, is the information passed on from the  
8       manufacturer to the pharmacy via the wholesaler?

9           A       I would have to go back and look at those  
10      documents. My memory is that the content was created by  
11      the distributors. I mean, it was their system.

12                   When you walk into a doctor's office, you  
13      often see these -- these screens that have information  
14      about particular drugs or medical conditions. Those  
15      also exist in drug stores. And they catch the eye of  
16      the customer while he or she is waiting in line.

17                   That sort of -- that was one vehicle for  
18      providing information about these opioid analgesics.  
19      And my recollection is that that content was shaped by  
20      the distributor marketing teams and not simply by the  
21      manufacturers.

22           Q       Anything else that your -- the belief that  
23      you say you have a couple answers ago is based on?

24                   MR. ELSNER: Objection.

25                   THE WITNESS: Could you be more precise,

1 types of materials that appear in pharmacies which you  
2 believe may have been shaped, to some degree, by a  
3 wholesaler or distributor, to the extent that those  
4 materials discuss particular benefits or risks or side  
5 effects of a drug, do you have any understanding as to a  
6 source of that kind of information?

7 MR. ELSNER: Objection.

8 THE WITNESS: What time period are we talking  
9 about?

10 BY MR. WEIMER:

11 Q Still in the post mid-1980 time period.

12 A I -- I really don't understand the question.  
13 Could -- could you repeat the last -- just the last part  
14 of the question?

15 Q To -- to the extent that the materials that  
16 you have in mind that you believe may have been shaped,  
17 to some degree, by a wholesaler discussed benefits or  
18 side effects of a drug, do you have any understanding of  
19 where that information about the benefits or side  
20 effects came from?

21 MR. ELSNER: Objection.

22 THE WITNESS: Well, in -- in the continuing  
23 education examples, the articles were originally  
24 drafted by the manufacturer. In the -- in the case  
25 that's cited on page 99 of the report, it's Kristi

1           Dover who -- of Purdue who comes to an  
2           AmerisourceBergen conference and then, as part of  
3           the continuing education program, provides that --  
4           that information.

5           So, off the top of my head, and -- and -- and  
6           noting that I haven't gone back through these  
7           materials, no other examples occur to me right now  
8           of that kind of marketing.

9       BY MR. WEIMER:

10           Q       Okay. You -- you mentioned a while ago that  
11           there's a number of documents that were produced in  
12           discovery of one or more of the opioid lawsuits.

13           If you had to estimate, up to today, how many  
14           documents have you reviewed that were produced in  
15           discovery by one or more of the defendants as opposed to  
16           historical material you may have uncovered based on your  
17           independent research?

18           MR. ELSNER: Objection.

19           THE WITNESS: You mean how many -- how many  
20           have I reviewed with respect to distributor  
21           marketing?

22       BY MR. WEIMER:

23           Q       In general. Order of magnitude. Have you  
24           had access to the entire universe of the defendants'  
25           discovery production, some subset of that?

1 activity of service wholesale --

2 MR. ELSNER: Objection.

3 THE COURT REPORTER: Could you repeat that?

4 You were garbled a little bit.

5 BY MR. WEIMER:

6 Q And as a general matter, do you ascribe  
7 anything improper about the business of service  
8 wholesaling?

9 MR. ELSNER: Same objection.

10 THE WITNESS: I don't think it's inherently  
11 improper. I think, under certain circumstances, it  
12 can be.

13 BY MR. WEIMER:

14 Q Dr. Courtwright, sticking with this concept  
15 of distributor marketing, as you describe it, do you  
16 intend to offer any opinions at trial in this case that  
17 any of the Distributor Defendants directly marketed to  
18 patients?

19 A To patients?

20 MR. ELSNER: Objection.

21 THE WITNESS: I am prepared to do so.

22 BY MR. WEIMER:

23 Q Okay. And what is the basis for that  
24 opinion?

25 A I mentioned it earlier. The -- the presence

1 in drug stores of various screens that contain  
2 advertising with respect to opioid products and -- and  
3 conditions that might be treated with them.

4 That seems to me to be direct-to-consumer  
5 advertising if you put up a screen and it's viewed by  
6 customers in a drug store while they're waiting in line  
7 to pick up their prescriptions.

8 Q Okay. And -- and just -- again, to make sure  
9 the record is clear, because we -- we have -- but can  
10 you -- when you say "screen," can you describe what you  
11 have in your mind? Is it a computer screen? Is it one  
12 of these big tall, you know, cutout-type displays?

13 What do you understand as a screen as you --  
14 as you used the term?

15 MR. ELSNER: Objection.

16 THE WITNESS: It's a monitor like the ones  
17 you see in the waiting rooms of doctors' offices  
18 that have various infomercials. And sometimes  
19 they'll do a break and they'll show you the  
20 AccuWeather, and then they'll go on to another  
21 infomercial.

22 BY MR. WEIMER:

23 Q Okay. Other than the example that you just  
24 described, are you -- are you intending to testify at  
25 trial about any other direct-to-consumer marketing

1 activities by any wholesaler?

2 MR. ELSNER: Objection. Asked and answered.

3 THE WITNESS: Well, I've already given you a  
4 couple of examples of -- of where they use  
5 continuing education programs to advise pharmacists  
6 on how to advise customers about opioids.

7 BY MR. WEIMER:

8 Q Do you consider that a form of  
9 direct-to-consumer advertising?

10 MR. ELSNER: Objection.

11 THE WITNESS: Well, the objective of -- of  
12 the marketing is to influence consumer behavior and  
13 get them not to worry about taking opioid-based  
14 medications. That seems to me it's aimed at the  
15 consumer.

16 BY MR. WEIMER:

17 Q Dr. Courtwright, you're not an expert in  
18 marketing, are you? You don't consider yourself to be  
19 an expert in marketing?

20 A I -- I know a lot about the marketing -- the  
21 historical aspects of marketing psychoactive substances  
22 about which I've written a couple of books.

23 I don't have a degree -- I don't have a Ph.D.  
24 in marketing, if that's what you're asking.

25 Q I'm asking if you consider yourself to be an

1       aware of any other examples of what you consider to be  
2       direct-to-consumer marketing by wholesalers?

3               MR. ELSNER: Objection.

4               THE WITNESS: As -- as -- as I sit here today  
5       and try to answer your question as honestly as I  
6       can, none comes to mind. If I -- if I went back  
7       through piles of documents, I might find something  
8       else, but nothing else comes to mind.

9       BY MR. WEIMER:

10            Q       Okay. We've talked about pharmacists, and  
11       we've talked about patients. I want to ask, though,  
12       about marketing to physicians.

13                   Do you intend to offer any opinion at trial  
14       that any of the Distributor Defendants in this case  
15       engaged in any marketing activity directly with  
16       prescribers or doctors?

17            A       Through -- through the use of coupons and  
18       saving cards and in providing information about the use  
19       of those cards and sending it back to the manufacturers  
20       to improve their targeting, yes.

21            Q       Can you expand on what you mean by your prior  
22       answer?

23               MR. ELSNER: Objection.

24               THE WITNESS: Expand how? I mean, some of  
25       the distributors had programs for opioids in which



1           they would distribute or help distribute coupons  
2           and saving cards, and they would report who was  
3           using them, and -- and they would report that  
4           information back to manufacturers.

5       BY MR. WEIMER:

6           Q       Coupon savings cards distributed to  
7           physicians?

8           A       Yes. In other words, the idea was to have  
9           a -- a coupon available at the time the physician was  
10          seeing a patient, and then physicians, maybe thinking  
11          about prescribing the drug, was worried about the  
12          initial cost of the medication or whether it's covered  
13          by insurance, and so they're -- they and the patient are  
14          both more willing to try this if they have a -- a  
15          discount available for the -- the first prescription.

16          Q       And so that the coupon that would have been  
17          offered by the drug manufacturer through the -- through  
18          the --

19          A       Through the distributor, correct.

20          Q       Okay. Other than the example you just  
21          described with respect to the coupons, are you aware of  
22          any other examples of -- of what you describe as  
23          marketing activity by a wholesaler to prescribers or  
24          doctors?

25          A       Only insofar as the Distributor Defendants

1       were subsidizing organizations like the American Pain  
2       Society, which were very much in the business of  
3       providing pro-opioid continuing medical education to  
4       physicians.

5               And also, I guess, as -- as I think about it,  
6       to the extent that they supported organizations like the  
7       American Pain Foundation or the Pain Forum and they were  
8       acting as advocacy organizations for a larger public.

9               MR. ELSNER: We've been going about an hour.  
10       If there's a convenient time in your questioning  
11       for a break --

12              MR. WEIMER: I was just thinking the same  
13       thing. Why don't we go off the record.

14              THE VIDEOGRAPHER: We are off the record at  
15       1:35.

16              (A recess was taken.)

17              THE VIDEOGRAPHER: We're back on the record  
18       at 1:51.

19       BY MR. WEIMER:

20              Q       Okay. Dr. Courtwright, the example that you  
21       mentioned of what you consider to be a form of  
22       direct-to-consumer marketing by wholesalers of the  
23       screens that are placed in pharmacies, that's -- that's  
24       not an example that you discussed in your report in this  
25       case, is it?

1           A           I have not found a document that confirms  
2           that.

3           Q           And do you see on Exhibit 19 that the total  
4           amount of money reflected at the bottom of the chart is  
5           \$132,000 -- \$132,661, correct?

6           A           Correct.

7           Q           And just in -- in rough numbers, the rebate  
8           line item above that constitutes roughly one-third of  
9           that total; would you agree?

10          A           No. Three times 40,000 is 120,000.  
11          But it -- it -- you know, it's 30 percent or something.  
12          Not quite a third.

13          Q           Okay. A little further down, there are a  
14          couple of entries for telemarketing.

15                   Do you see those?

16          A           I do.

17          Q           Okay. Do you have any understanding, either  
18          from the face of this document or any other information  
19          you've reviewed, as to what the telemarketing program  
20          was that is referred to here?

21          A           I do.

22          Q           Okay. Can you explain your -- that  
23          understanding?

24          A           I recall a Cardinal document representing to  
25          manufacturers that it was Cardinal's own trained staff

1       that placed the calls to the pharmacists, and they  
2       actually had developed personal relationships with the  
3       pharmacists over time and that that was a good reason to  
4       use the Cardinal telemarketing service.

5           Q       So is your understanding, based on that  
6       document, that the telemarketing program that is  
7       described here is telemarketing involving pharmacists?

8           A       Yes. That's my understanding based on other  
9       documents.

10          Q       Okay. Did -- did any of the documents or  
11       information that you reviewed indicate that this program  
12       contemplated any telemarketing by any wholesaler direct  
13       to consumers or patients?

14          A       I have seen no documents to that effect.

15          Q       Okay.

16          A       With respect to telemarketing.

17          Q       Okay. Do you see on here a couple of entries  
18       that relate to screen-saver advertising?

19          A       I do, yes.

20          Q       Okay. Do you have an understanding, whether  
21       from the face of this document or any other information  
22       you've reviewed, what that refers to?

23          A       It's what --

24                   MR. ELSNER: Objection.

25                   Go ahead.

1 THE WITNESS: It's -- it's what I remember  
2 from the 1990s back in the day when you would see  
3 screen -- when screen savers were a thing, you  
4 would sometimes see advertising. I mean, I know  
5 what a screen saver is from this era. I didn't see  
6 a document that described in detail what this  
7 screen saver is.

8 BY MR. WEIMER:

9 Q Okay. Do you have any understanding from the  
10 information that you reviewed whose screen the screen  
11 saver would show up on, meaning pharmacists, doctors,  
12 patients, somebody else?

13 A From context -- that is, from the other  
14 documents I looked at -- what's being referenced here, I  
15 believe, are the pharmacists' screens.

16 One of the things that happened in the  
17 industry at this point in time is that there was more  
18 and more digital communication between the wholesalers  
19 and the pharmacists, that is, between the distributors  
20 and the pharmacists. And so my assumption is that this  
21 was going out to alert pharmacists about this new  
22 product.

23 Q Okay. Dr. Courtwright, is there anything  
24 about the OxyContin promotional programs that are listed  
25 on Exhibit 19 that you intend to testify at trial were

1           A       So -- so anyway, so -- so if -- if your  
2       question is, am I sure that all of these wholesaler  
3       programs that are listed here are exclusively aimed at  
4       pharmacists, the answer is, no, I'm not sure.

5           Q       Okay. Would you agree with me that,  
6       regardless of the success or failure of any of the  
7       specific wholesaler programs that are described in these  
8       first couple of pages of Exhibit 20, that, lawfully,  
9       before a patient would receive one of these medications,  
10      they would still need a prescription for it from a  
11      doctor?

12          A       That is correct.

13          Q       If you turn to page two of Exhibit 20,  
14      under -- directing your attention to the portion of the  
15      page under the heading "Obstacles to Our Growth," do you  
16      see that section?

17          A       I do.

18          Q       And do you see, in the second sentence of  
19      that first paragraph of that section, a commentary by  
20      the author that says, "While many of the programs are  
21      difficult to tie to actual sales growth, they go to  
22      tremendous amount of goodwill with the wholesaler" --

23          A       I do.

24          Q       -- do you see that?

25                   Based on the other information that you've

1 reviewed in connection with your work in this case,  
2 do -- do you have any understanding, one way or the  
3 other, whether it is difficult to tie any of these  
4 programs to actual sales growth?

5 MR. ELSNER: Objection.

6 THE WITNESS: Well, it's certainly the case  
7 that, historically, the distributors represented  
8 such programs -- such marketing programs as  
9 providing a boost to manufacture or sales.

10 Now, Mr. Green may be expressing skepticism  
11 as to, you know, how easy it is to pin down or  
12 quantify that sales growth. That was certainly a  
13 claim that was made by distributors to their  
14 customers.

15 BY MR. WEIMER:

16 Q And just to -- just to make sure I'm clear,  
17 while there is some discussion in this document of  
18 OxyContin, there is also discussion of other -- other  
19 medications as well, correct?

20 A At the top of the page, I see a reference to  
21 MS Contin, which is also an opiate; Kadian, which is  
22 also an opiate.

23 Do you want me to read through the entire  
24 document and pick out the nonopioid references?

25 I mean, I'll just take your word for it that

1           Q       Okay. Is -- is that your understanding of  
2       the journalistic and government investigations that you  
3       describe here, that the focus of those investigations  
4       was primarily on the failure of distributors to  
5       investigate, suspend, and report suspicious orders and  
6       on its lobby -- their lobbying efforts?

7           A       I believe that is an accurate  
8       characterization of the major themes in the sources  
9       cited in footnote 102.

10          Q       Okay. If you go over to page 104, you're  
11       having some additional discussion about the wholesale  
12       drug business in the United States. And you see at the  
13       end of the first paragraph on page 104, you write, "By  
14       the late 19th century, they had become vertically  
15       integrated operations involved in marketing as well as  
16       supply, service wholesalers in industry parlance."

17                   Do you see that?

18          A       I do.

19          Q       What's your understanding of -- strike that.

20                   When you use the term "vertically integrated"  
21       in that sentence on page 104 of your report, what do you  
22       mean?

23          A       I mean they were in -- involved in all  
24       aspects of the production and distribution and marketing  
25       chain. And, in fact, even -- it's even more extensive



1       than that. McKesson and other large wholesalers were  
2       opium importers, and they distributed their own opiates  
3       as well as opiates that were manufactured by other  
4       companies. And they advertised both their own opiates  
5       as -- as well as the products of other firms that they  
6       distributed.

7               And, as I said earlier, they also gave advice  
8       to various retailers about how best to -- to sell  
9       merchandise. They were involved in the marketing. And  
10      so in just about every way you can be involved, they --  
11      they were involved in -- in the process from poppy to  
12      drug store.

13             That's what I meant by "vertically  
14      integrated."

15            Q       Okay. Do you intend to offer an opinion in  
16      this case at trial that the Distributor Defendants in  
17      this case are vertically integrated, as you used the  
18      term today?

19            MR. ELSNER: Objection.

20            THE WITNESS: I'm prepared to offer such a  
21      statement if asked.

22      BY MR. WEIMER:

23            Q       Okay. You have a discussion on page 104  
24      about McKesson & Robbins and you -- you -- there's  
25      discussion elsewhere in your report about McKesson &

1 the person is doing something that's perfectly legal,  
2 you're taking prescribed medications and they're not  
3 diverting them and so on, that doesn't mean that that  
4 person is not in a whole lot of trouble or at -- or at  
5 risk of their -- of their life.

6 So there are other complications there. But  
7 in terms of the legal distinction, if that's what you're  
8 looking for, I agree.

9 Q Okay.

10 THE WITNESS: Mr. Weimer, do you mind if we  
11 take a short break so I can wet my whistle?

12 MR. WEIMER: Of course. Take five or ten  
13 minutes.

14 THE VIDEOGRAPHER: We are off the record at  
15 3:43.

16 (A recess was taken.)

17 THE VIDEOGRAPHER: We are back on the record  
18 at 3:59.

19 BY MR. WEIMER:

20 Q Okay. Dr. Courtwright, I want to circle back  
21 to the discussion we had a little while ago with respect  
22 to some of the testimony you gave about marketing  
23 activity by wholesalers. A couple just follow-up  
24 questions there.

25 First, you mentioned some document or

1 documents you think you had reviewed with respect to  
2 screens that might have been provided by wholesalers to  
3 pharmacies.

4 Do -- do you generally recall that testimony?

5 A I do.

6 Q Do -- do you have any further recollection as  
7 to what the document or documents were that you saw that  
8 described those screens?

9 A Sure. I think it was Cardinal, and I think  
10 it was tied into some kind of marketing point scheme.

11 In other words, in exchange for volume  
12 business, the distributors would assign a certain number  
13 of marketing points to the manufacturers, and the  
14 manufacturers could then use those to purchase certain  
15 marketing services that were offered by the  
16 distributors. And among those services were these --  
17 these advertising -- these screen advertising gimmicks  
18 or promotions.

19 Now, that's my best recollection.

20 Q Okay. The marketing point scheme or program  
21 that you described, do you recall seeing any information  
22 indicating whether that program was to include only  
23 opioid medications or other medications as well?

24 MR. ELSNER: Objection.

25 THE WITNESS: Oh, I'm virtually certain that